

BEST AVAILABLE COPY

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | AT | | 6-23-00 |
| O.I.P.E. CLASSIFIER | M+W | 50 | 6-27-00 |
| FORMALITY REVIEW | | 78017 | 8/14/00 |
| RESPONSE FORMALITY REVIEW | | 11 | 10/30/00 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|----------------|---------|
| Final Original | |
| 1 | 9/8/01 |
| 2 | 9/11/01 |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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